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*To ensure access to high-quality,
patient-centered, cost-effective health
care to Los Angeles County residents
through direct services at DHS facilities
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community and university partners.*



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ADOPTED

BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES

24 May 1, 2012

Sachi A. Hamai
SACHI A. HAMAI
EXECUTIVE OFFICER

May 01, 2012

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, California 90012

Dear Supervisors:

**APPROVAL OF AMENDMENT TO PATIENT SATISFACTION SURVEYS
AGREEMENT
(ALL SUPERVISORIAL DISTRICTS)
(3 VOTES)**

SUBJECT

Request approval to amend the Agreement with Press Ganey Associates Inc., to add outpatient satisfaction surveys for primary care clinics throughout the Department of Health Services, to add inpatient and rehabilitation survey services for Rancho Los Amigos National Rehabilitation Center, and delegated authority to add/delete end-users and surveys, as needed and adjust the County's maximum obligation accordingly.

IT IS RECOMMENDED THAT YOUR BOARD:

1. Authorize the Director of Health Services Director, or his designee, to execute Amendment No. 2 to Agreement No. H-703322 with Press Ganey Associates, Inc. (PG) to :i) add outpatient survey services for all Department of Health Services (DHS) facilities/clinics where primary care services are provided, effective on Board approval, ii) add Rancho Los Amigos Rehabilitation Center (RLANRC) for the current PG Agreement for the provisions of patient satisfaction surveys for inpatient and rehabilitations services , effective July 1, 2012, and iii) increase the County's maximum obligation by \$79,363 for the new outpatient provision, and \$50,807 for RLANRC, for a revised total maximum County obligation of \$1,019,271 for the entire term of the Agreement.

2. Delegate authority to the Director, or his designee, execute future

amendments to this Agreement to add or delete, patient satisfaction survey as well as DHS end-users and to adjust the County's maximum obligation accordingly, subject to review and approval by County Counsel, with notice to the Chief Executive Office and your Board.

3. Delegate authority to the Director, or his designee, to amend Agreement to increase the maximum agreement obligation by no more than 10 percent, or a total of \$101,927, in the event additional surveys are required to be mailed as a result of increased patient visits admissions and/or with notification to County Counsel, CEO, and your board.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Approval of the first recommendation will allow the Director to execute Amendment No. 2, substantially similar to Exhibit I, to add outpatient survey services for all DHS facilities/clinics where primary care services are provided. This action is needed in order for DHS to comply with one of the requirements of the Section 1115 Medicaid Waiver (Waiver) and Centers for Medicare and Medicaid Services (CMS) regulations, whereby DHS is obligated to conduct inpatient and outpatient patient satisfaction surveys at all DHS' facilities.

On November 2, 2010, the California Department of Health Services (CDHS) and CMS entered into the new Waiver, commonly known as the California Bridge to Reform, for a five year period, commencing November 1, 2010. This Waiver provides the framework to federal Health Care Reform in 2014. This Waiver created the Delivery System Reform Incentive Program (DSRIP), a federal pay-for-performance quality improvement initiative that is the first of its kind in the nation in terms of its structure and scope. The DSRIP offers an unprecedented opportunity for California's 21 public hospital systems to transform care delivery to be more integrated and organized, and improve patient health outcomes. One of the requirements of the DSRIP is that all California public hospital systems must begin collecting and reporting data on the patient experience in ambulatory care.

PG has already established the IT and data connections needed for PG to work efficiently with Harbor-UCLA Medical Center (H-UCLA MC), Olive View-UCLA Medical Center (OV-UCLA MC), and LAC+USC Medical Center (LAC+USC MC) that currently use their services. PG is a proven contractor who has demonstrated expertise in providing quality services according to the mandated methodology, timely and reliable reporting, custom surveys, staff training resources and other data management tools. By adding the outpatient component to the current Agreement with PG, DHS is able to meet the outpatient survey requirements of the Waiver, accelerate the timeline along which we will gain valuable information on the state of our outpatient clinic services, and will reduce cost in IT implementation.

This recommended Amendment will add RLANRC to the current PG Agreement. RLANRC currently contracts with National Research Corporation; however, this Agreement will expire June 30, 2012. This action will provide continuity and standardization required patient satisfaction surveys services among all DHS facilities, to ensure ongoing compliance with the CMS regulations. CMS issued regulations on July 1, 2007 for the Hospital Consumer Assessment of the Healthcare Providers and System (HCAHPS) data reporting requirements. These regulations specify that Medicare and Medicaid payment rates will be reduced by 2.0 percentage points for any hospital that does not submit the required quality data. The HCAHPS provides a standardized survey instrument and data collection methodology for measuring patients' perspectives on hospital care and enables valid comparisons to be made across similar hospitals nationwide.

Under the Agreement, PG mails patient satisfaction surveys to patients after they are discharged

from the hospitals. Survey results are compiled into a variety of monthly and quarterly reports that include, but are not limited to, demographic profiles of respondents and analysis of responses by questionnaire sections. These reports provide DHS with information for improving patient care, customized reporting for compliance with the above requirements, and benchmarking information against other similar healthcare providers in the nation. In addition to meeting regulations, PG provides the data requested by the California Hospital Assessment and Reporting Taskforce which is a public report card for California hospitals.

The second recommendation will enable DHS to expand on the types of surveys that may be needed in the future, that include specialty care, ancillary, as well as other types of surveys required by contracts or grants awarded to the Department. DHS is currently revising patient satisfaction survey program for the Health Way L.A. In addition, DHS has included patient satisfaction as a component of its application under the challenge grant. If awarded, DHS will have a very compressed timeline to implement its proposal plan.

Approval of the third recommendation will enable DHS to increase the maximum obligation of the Agreement by up to 10 percent due to increased patient satisfaction volume.

Implementation of Strategic Plan Goals

The recommended actions support Goal 4, Health and Mental Health of the County's Strategic Plan.

FISCAL IMPACT/FINANCING

The total estimated cost for the addition of outpatient satisfaction surveys is: \$79,363, effective on Board approval date. The addition of RLANRC to the inpatient portion of the Agreement will be in the amount of \$ 50,807 effective July 1, 2012 through December 31, 2013.

	FY 2011-12 (2 months)	FY 2012-13	FY 2013-14 (6 months)	Total
Outpatient Clinician & Group Consumer Assessment of Healthcare Providers (CG-CAHPS)	\$7,937	\$47,617	\$23,809	\$79,363
RLANRC	\$0	\$33,870	\$16,937	\$50,807
Grand Total	\$7,937	\$81,487	\$40,746	\$130,170

Funding is included in the Department's Fiscal Year 2011-12 Final Budget, and will be funded within existing resources in future fiscal years. Any increased cost due to an increase in the number of surveys will be funded within existing resources. PG is reimbursed on a per survey basis.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

On November 18, 1997, your Board authorized DHS to join the University HealthSystem Consortium (UHC) and its group purchasing program, to obtain unique services which otherwise would not be available to the County. As a member of UHC, DHS is able to access the group purchasing program service agreements and does so with prior approval from your Board.

After UHC conducted a competitive solicitation, PG was awarded a UHC agreement in October 2007 for Patient Satisfaction Measurement Services. On December 11, 2007, your Board approved an initial agreement with PG, based on a UHC competitive solicitation, for the provision of patient satisfaction survey services at H-UCLA MC, OV-UCLA MC, and LAC+USC MC effective through June 30, 2009.

As a result of a second competitive solicitation conducted by UHC, PG was selected to enter into a Patient Satisfaction Measurement Services Agreement with UHC on January 21, 2009. The PG agreement with UHC expires on December 31, 2013. PG currently provides patient satisfaction survey services to 1,249 hospitals nationwide, or 45 percent of all the facilities participating in HCAHPS.

On June 9, 2009 your Board authorized DHS to extend this Agreement with PG beyond December 31, 2013, upon mutual written agreement by the parties, if UHC continues to contract with PG beyond that date, and be co-terminous with the UHC agreement, subject to review and approval by County Counsel, CEO, and notification to your Board.

County Counsel has approved Exhibit I as to use and form.

CONTRACTING PROCESS

Not applicable.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of these actions will ensure DHS' compliance with CMS and CG-CAHPS regulations.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Mitchell Katz". The signature is fluid and cursive, with the first name "Mitchell" and last name "Katz" clearly distinguishable.

Mitchell H. Katz, M.D.

Director

MHK:ev

Enclosures

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors

**LAC+USC MEDICAL CENTER, HARBOR-UCLA MEDICAL CENTER,
OLIVE VIEW-UCLA MEDICAL CENTER PATIENT SATISFACTION SURVEYS
SERVICE AGREEMENT HEREIN AMENDED TO:
DHS PATIENT SATISFACTION SURVEYS SERVICE AGREEMENT**

AMENDMENT NO. 2

THIS AMENDMENT is made and entered into this ____ day of _____, 2012,

by and between

COUNTY OF LOS ANGELES
(hereafter "County"),

and

PRESS GANEY ASSOCIATES, INC.
(hereafter "Contractor").

WHEREAS, reference is made to that certain document entitled "LAC+USC MEDICAL CENTER, HARBOR-UCLA MEDICAL CENTER, OLIVE VIEW-UCLA MEDICAL CENTER PATIENT SATISFACTION SURVEYS SERVICE AGREEMENT", approved by the Board of Supervisors on December 11, 2007, and further identified as County Agreement No. H-703322, and any amendments thereto (all referred hereafter as "Agreement"); and

WHEREAS, it is the intent of the parties hereto to add inpatient survey services at Rancho Los Amigos National Rehabilitation Center (Rancho) effective July 1, 2012 through December 31, 2013; and

WHEREAS, it is the intent of the parties hereto to add outpatient survey services for primary care clinics as a result of the Medicaid Section 1115 Waiver, whereby DHS is obligated to conduct outpatient satisfaction surveys at all DHS' facilities; and

WHEREAS, it is the intent of the parties hereto to agree to add or delete patient satisfaction surveys as well as DHS end-users; and

WHEREAS, said Agreement provides that changes may be made in the form of a written amendment which is formally approved and executed by the parties.

NOW, THEREFORE, the parties agree as follows:

1. This Amendment will now be known as DHS PATIENT SATISFACTION SURVEYS SERVICE AGREEMENT and shall become effective upon date of Board approval.

2. Agreement Paragraph 3, DESCRIPTION OF SERVICES, shall be revised to read as follows:

“3. DESCRIPTION OF SERVICES: Contractor agrees to provide services to County in the manner and form as described in the body of this Agreement Exhibit A-1, attached hereto and incorporated herein by reference. The Director or his/her designee may execute written amendments to add or delete patient satisfaction surveys as well as DHS end-users.”

3. Agreement Paragraph 4, MAXIMUM OBLIGATION OF COUNTY, shall be revised to read as follows:

"4. MAXIMUM OBLIGATION OF COUNTY: During the term of this Agreement, the maximum obligation of County shall not exceed One Million Nineteen Thousand Two Hundred and Seventy-One Dollars (\$1,019,271).

The maximum obligation may be increased by no more than ten percent (10%) or a total of One Hundred and One Thousand, Nine Hundred Twenty-Seven Dollars (\$101,927) in the event that additional surveys need to be mailed.”

4. Agreement Paragraph 5, BILLING AND PAYMENT, shall be revised to add Subparagraphs H, and I to read as follows:

“H. Effective upon date of Board approval, Contractor shall bill County in accordance with the rates set forth in Base Fee Schedule VI for outpatient survey services, attached hereto and incorporated herein by reference.

I. Effective July 1, 20012, Contractor shall bill County in accordance with the rates set forth in Base Fee Schedule VII for inpatient survey services at Rancho, attached hereto and incorporated herein by reference.

J. Contractor will reimburse County for surveys returned without comments at the rate of (\$ 0.20) per survey as listed under Optional Comments Coding Fee in all Base Fee Schedules for all County facilities.”

5. Base Fee Schedules VI and VII, attached hereto, shall be added to the Agreement, and incorporated in the Agreement by reference.

6. Except for the changes set forth hereinabove, Agreement shall not be changed in any respect by this Amendment.

IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be executed by its Director of Health Services, and

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Contractor has caused this Amendment to be executed in its behalf by its duly authorized officer, the day, month, and year first above written.

COUNTY OF LOS ANGELES

By _____
Michell H. Katz, M.D.
Director of Health Services

PRESS GANEY ASSOCIATES, INC.
Contractor

By _____
Signature

Printed Name

Title _____
(AFFIX CORPORATE SEAL)

APPROVED AS TO FORM:
BY THE OFFICE OF THE COUNTY COUNSEL

APPROVED AS TO CONTRACT
ADMINISTRATION:

DEPARTMENT OF HEALTH SERVICES
CONTRACTS AND GRANTS DIVISION

**HARBOR-UCLA MEDICAL CENTER, OLIVE VIEW-UCLA MEDICAL CENTER,
LAC+USC MEDICAL CENTER, AND RANCHO LOS AMIGOS NATIONAL
REHABILITATION CENTER
PATIENT SATISFACTION SURVEYS**

STATEMENT OF WORK

I. Service Contract (DED):

- Survey tool for contracted patient service(s). This would include as many versions of that services survey as necessary. With those surveys comes one free change per quarter, which can include the addition or deletion of custom questions as well as adding versions and eliminating versions of the setting tools.
- Four (4) quarterly database reports that have benchmarking information comparing the organization with up to three groups per quarter. This is in addition to the Press-Ganey (PG) cohort (more than 850 facilities across the country).
- Unlimited access to Press Ganey's online tools, for up to 200 users. This online tool allows staff to "slice and dice" data. Staff can view survey images, check the number of surveys mailed and the number received, as well as review recommendations for improvement located in *Solution Starter*.
- Consultation - unlimited phone and e-mail help. Along with phone consultations, each facility is entitled to one visit each year. PG consultant will come on site, teach an educational seminar, workshop or help you find solutions for improving the patients' experiences. Access, through your service contract, to all PG staff, including Research and Development, our Knowledge Management Department and even the Chief Executive Officer (CEO).
- Access to P-G Online Forum, an information exchange forum allowing facilities to access best practices and working solutions for improving patient satisfaction. There is an option to obtain Facility Characteristic reports, where PG will provide each facility scores based on their hospital's demographics and Major Diagnostic Category (MDC) reports in April and October, as well as the Diagnostic Related Grouping (DRG) scores. There is also an annual Gold Interpretation and Analysis report (GIA) for Inpatient; a more in-depth look at facility scores. The GIA report tabulates one year's data and determines the long- term improvement priorities for the organization.

II. Optional Comments Contracts (CMC):

- PG will transcribe the patients' comments. Reports are provided monthly, quarterly or annually. First Person Comments Reports, provided on a quarterly basis, is an Excel spreadsheet listing the patient comments while linking them to patient's demographic information such as gender, score, unit, specialty, age, etc. These reports can assist a facility in determining how the organization may improve services for specific groups of patients
- Through the Press Ganey's online tool, ability to view your comments in real time through the real-time Comments section in InfoEDGE.

III. InfoTurn Pricing (Mailing):

- Print a survey and cover letter for the respective service for identified patients. . An outgoing envelope and a “business reply envelope” is included as part of the mailing, as well as postage for outgoing and incoming mail.
- Mailing is completed within 72 hours of receipt of the electronic data, for patients.
- On the return end, surveys are scanned into our database within 72 hours of receiving it, so there is access to the information on InfoEDGE in real time.
- Survey comments are transcribed (if comment processing has been contracted)
- Conduct a survey in English and Spanish, compile results, present reports with appropriate statistical display, benchmarking and comparison with other hospitals; provide on-site visits to help staff understand and use the data; provide custom questions; provide reporting by specialty such as Pediatrics, Psychiatry and Rehabilitation; provide networking with “best practice” facilities; provide local state and national comparisons and on-line access to data and surveys.
- Contractor to print, mail, and handle the surveys of a pre-determined amount per Schedule for each particular County facility.
- Contractor to electronically receive discharged patient information from all County facilities, and send surveys to randomly selected patients.

IV. Reporting

- County facilities to receive quarterly reports that provide ready-to-use information. Typical reports include, but are not limited, to:
 - A) Demographic Profile of Respondents
 - B) Overall Mean Trend Analysis
 - C) Overall Percentile Rank Trend Analysis
 - D) Overall analysis by Questionnaire Sections
 - E) Overall Mean/Rank Analysis Across Sections
 - F) Question Analysis
 - G) Top Box Analysis
 - H) Comparison of Question Scores (All Items)
 - I) National Percentile Rank by Question
 - J) Correlation Coefficients
 - K) Priority Index (Internal)
 - L) Facilities in the Database
 - M) Facility/National Facilities Comparison
 - N) National Percentile Scores
 - O) Section Mean Trend Analysis
 - P) Section Percentile Rank Trend Analysis
 - Q) Section Analysis
 - R) Mean/Rank Analysis
 - S) Unit Analysis
 - T) Specialty Analysis
 - U) Statistical Analysis

- Contractor to provide custom reports featuring specialized studies of County facilities data.
- Reports posted to Press Ganey's online tool by the 18th of the report month.
- Executive Summary Report – Summarizing key changes in results from last reporting period and focusing on priorities for improvement.
- Key Analyses Report – Including changes from period to period, Percentile Ranking, Correlations, Priorities, Unit/Location comparisons.
- Electronic Report – In Color posted to Press Ganey's online tool by the 18th of the report month.
- Provide benchmarking with like providers, as selected by each facility, from Contractor's current clients.
- Additional benchmarking (a total of three) by customized peer groups to be provided by Contractor by the following:
 - A) By bed size
 - B) By volume
 - C) By region
 - D) By freestanding facility
 - E) By specialty
 - F) By profit/not-for-profit
 - G) By health system

IV. Contractor to Provide

- Recommendations on maximizing response rates.
- Upon receipt of the patient – completed questionnaires, vendor to handle all of the data entry, quality control and analysis using computer software designed specifically for the purpose.
- Contractor to provide Internet capability and on-line analysis to be accessible at anytime and to allow users to manipulate the computed data and develop their own unique reports.
- Contractor to provide free, unlimited telephone consultation with clients through toll- free numbers. Customer service staff to be available to discuss questions, suggest special reports and help interpret data, through the designated County facilities contact persons.
- Contractor to provide free on-site training sessions as stated above.
- Contractor to provide a Guide to Interpreting Statistics (GTI).
- Contractor holds an annual client conference offering a variety of speakers who share insights about integrating patient satisfaction data and quality improvement programs. Clients present their case studies on quality improvement.

- The Contractor conference allows an opportunity to network with peers, Press Ganey faculty, and other leaders in the health care industry. The 2012 National Client Conference is scheduled for November 12-14 in Washington D.C.
- Contractor to provide one day regional conferences each year in cities throughout the country designed to enhance understanding of the Contractor's Report and to help clients succeed in their efforts to improve the quality of health care. Dates, locations and registration details are updated on Contractor's website, www.pressganey.com.
- Contractor to provide bi-monthly newsletter to offer clients information about using the surveys, interpreting the data, non-response bias, goal setting, answering client questions and highlighting the use of satisfaction data in performance improvement programs. Copies to be sent to the CEO and County facilities contact persons, additional copies to be available for internal distribution.
- Contractor to provide on-line individual survey viewing in a "scannable" format. Images of scanned surveys to be available for County facilities to access on a daily basis via Press Ganey's online tool, to provide the opportunity to review patient comments for immediate action related to risk management issues and employee recognition.
- Contractor to provide website with extensive information on line: to include but not limited to: Products, Online Reports, News, Research & Development, Success Stories, Value Added Services, Accreditation News, Published Articles and consulting.
- Contractor to provide "second wave" mailing services sufficient to meet, but not exceed hospital participation requirement, as outlined in the Hospital Consumer Assessment of Health Providers and Systems (HCAHPS) initiative, sponsored by the Centers for Medicare and Medicaid Services (CMS).
- Contractor to provide mailing services, which may include a second wave, sufficient to meet, but not exceed hospital participation requirement of the Section 1115 Medicaid Waiver Delivery System Reform Incentive Pool, for implementation of Clinical Group Consumer Assessment of Health Providers and System (CG-CAHPS), coordinated by the California Association of Public Hospitals and Health Systems (CAPH) and California Health Care Safety Net Institute (SNI).

V. Press Ganey Additional Provisions

Survey. County agrees the Survey will be used for internal purposes only, and agrees not to sell, convey, or distribute the Survey to any other person, firm, or organization during or after the Terms of this Agreement.

Survey Distribution. Contractor will ensure the quality of the national database for its survey service products through established standards of data collection and data reporting. In order to participate in the national database, County agrees to comply with the requirements of the survey distribution methodology County has selected.

Minimum “n”. County acknowledges that reporting standards require that a minimum number of surveys must be returned before a statistically-valid report can be generated. The minimum number (minimum “n”) required to generate a report for the large database Inpatient service is 175, Pediatric Inpatient 142, ER 145, Ambulatory Surgery 106, Outpatient Services 149, and for other services and the small database, the minimum number is 30. If County can demonstrate that at least fifty percent (50%) of the eligible recipients responded to the survey, the minimum “n” standards may be suspended. In order to qualify for this suspension, County must produce historical documentation of distribution and response patterns.

Ownership. Contractor understands that County will allow Contractor limited access to certain patient information, which is the sole property of County. Contractor will include within the Press Ganey Knowledge Base (e.g., Contractor’s comparative or benchmark databases) data that has been de-identified and stripped of indicators such that one skilled in administering medical records could not link medical information to a specific patient. Data which has been stripped of patient identifying indicators such as patient name, address, medical record number, and patient account number and incorporated into Contractor’s comparative or benchmark databases shall cease to be patient information and/or County information and shall become part of the PG Knowledge Base. Contractor owns the PG Knowledge Base and grants to County a non-exclusive, non-transferable license to use the PG Knowledge Base for purposes of the agreed upon relationship between County and Contractor.

Raw Data Request. Press Ganey is happy to accommodate your request for a data file containing the data responses for your organization to Press Ganey administered surveys (“Data Disk”). Pursuant to our policy relating to data files, Press Ganey will provide you with a data file on the following conditions:

1. You may use the data file solely for internal purposes and not for the benefit of any third person or entity.
2. You may only share, disclose, or transmit the information contained on the data file to a person who is an employee of your organization or who has a contractual relationship with your organization.
3. Information contained in the data file may be shared with an outside organization with whom your organization has a contractual relationship within the context of further analysis of your own performance. The data and information may not be used by an outside organization in any manner that combines the data file or any of the information on the data file with other information to generate benchmarks.
4. Information contained on the data file may not be shared by you with another organization that provides patient satisfaction/experience/engagement measurement and reporting tools and/or services.
5. You acknowledge your agreement to these conditions by signing a contract addendum which references this Statement of Work
6. Press Ganey agrees to provide quarterly Raw Data reports to the County facilities who have requested this information. The County understands that Raw data could be several months past the date of discharge of the patients.

Press Ganey Associates, Inc.

Schedule VI

May 1, 2012 through December 31, 2013

CG-CAHPS "Kaplan-Stern" Sampling Annual Contract Fees

Page 1 of 2

May 1, 2012 through June 30, 2012									
Service	Annual Contract Fees for Quarterly Reports	Annual Number of Surveys mailed	2nd survey mailed for HCAHPS patients @\$1.30	Est. Annual Number of Surveys Returned	Est. InfoTurn (Printing, Mailing & Receiving) Charges @\$1.71	Subtotal of Basic Charges	Optional Annual Comments Contract Fee	Optional Comments coding Fee @\$0.20	Est. Total basic and optional fees
CG-CAHPS	\$1,070	2,182	\$2,127	392	\$3,730	\$6,928	\$573	\$436	\$7,937
Total	\$1,070	2,182	2,127	392	\$3,730	\$6,928	\$573	\$436	\$7,937

July 1, 2012 through June 30, 2013									
Service	Annual Contract Fees for Quarterly Reports	Annual Number of Surveys mailed	2nd survey mailed for HCAHPS patients @\$1.30	Est. Annual Number of Surveys Returned	Est. InfoTurn (Printing, Mailing & Receiving) Charges @\$1.71	Subtotal of Basic Charges	Optional Annual Comments Contract Fee	Optional Comments coding Fee @\$0.20	Est. Total basic and optional fees
CG-CAHPS	\$6,420	13,089	\$12,762	2356	\$22,382	\$41,564	\$3,435	\$2,618	\$47,617
Total	\$6,420	13,089	12,762	2,356	\$22,382	\$41,564	\$3,435	\$2,618	\$47,617

July 1, 2013 through Dec. 31, 2013									
Service	Annual Contract Fees for Quarterly Reports	Annual Number of Surveys mailed	2nd survey mailed for HCAHPS patients @\$1.30	Est. Annual Number of Surveys Returned	Est. InfoTurn (Printing, Mailing & Receiving) Charges @\$1.71	Subtotal of Basic Charges	Optional Annual Comments Contract Fee	Optional Comments coding Fee @\$0.20	Est. Total basic and optional fees
CG-CAHPS	\$3,210	6,545	\$6,381	1178	\$11,192	\$20,783	\$1,718	\$1,309	\$23,809
Total	\$3,210	6,545	\$6,381	1,178	\$11,192	\$20,783	\$1,718	\$1,309	\$23,809

RATES: Wave 1 surveys with comments = \$1.91; Wave 1 surveys without comments = \$1.71; Wave 2 surveys with or without comments = \$1.30

NOTE: Press Ganey will reimburse County at rate of \$0.20 per survey returned without comments

	Data	
Clinics	Sum of Number of providers (of any FTE)	Sum of # completed surveys -- Kaplan Stern Sampling Guidance
Antelope Valley -- all	2	30
Bellflower -- all	4	60
Dollarhide -- all	2	30
El Monte adult	14	70
El Monte pediatrics	5	50
Glendale -- all	2	30
Harbor adult	9	90
Harbor HIV	4	60
Harbor Lomita	14	70
Harbor pediatrics	18	90
HDHS adult and HIV	6	60
HDHS pediatrics	4	60
Hudson adult	11	55
Hudson pediatrics	4	60
Humphrey adult	13	65
Humphrey pediatrics	3	45
La Puente -- all	3	45
LACUSC adult	5	50
LACUSC MCA	3	45
LACUSC pediatrics	5	50
LACUSC Rand Shrader	15	75
LACUSC resident	8	80
Lake LA -- all	2	30
Littlerock -- all	2	30
Long Beach -- all	10	50
Mid-Valley -- all	20	100
MLK adult	7	70
MLK HIV	5	50
MLK pediatric	5	50
OVMC adult	14	70
OVMC HIV	5	50
OVMC pediatrics	6	60
Rancho med/surg	2	30
Rancho neurology	2	30
Rancho spine	5	50
Rancho stroke	6	60
Roybal adult	12	60
Roybal pediatrics	5	50
San Fernando adult	9	90
South Valley -- all	8	80
Wilmington -- all	7	70
Grand Total	286	2350

Press Ganey Associates, Inc.

Schedule VII

July 1, 2012 through December 31, 2013

Rancho Los Amigos National Rehabilitation Center Annual Contract Fees

Fiscal Years 2012-13 (July 1, 2012 through June 30, 2013)

Service	Annual Contract Fees for Quarterly Reports	Annual Number of Surveys mailed	2nd survey mailed for HCAHPS patients @\$1.30	Est. Annual Number of Surveys Returned	Est. InfoTurn (Printing, Mailing & Receiving) Charges @\$1.71	Subtotal of Basic Charges	Optional Annual Comments Contract Fee	Optional Comments coding Fee @\$0.20	Est. Total basic and optional fees
Inpatient	\$6,420	3,832	\$2,235	809	\$6,553	\$15,207	\$3,435	\$766	\$19,409
Rehab	\$6,420	1,837	\$1,097	411	\$3,141	\$10,658	\$3,435	\$367	\$14,461
Total	\$12,840	5,669	3,332	1,220	\$9,694	\$25,866	\$6,870	\$1,134	\$33,870

July 1, 2013 through Dec. 31, 2013

Service	Annual Contract Fees for Quarterly Reports	Annual Number of Surveys mailed	2nd survey mailed for HCAHPS patients @\$1.30	Est. Annual Number of Surveys Returned	Est. InfoTurn (Printing, Mailing & Receiving) Charges @\$1.71	Subtotal of Basic Charges	Optional Annual Comments Contract Fee	Optional Comments coding Fee @\$0.20	Est. Total basic and optional fees
Inpatient	\$3,210	1,916	\$1,118	405	\$3,276	\$7,604	\$1,718	\$383	\$9,705
Rehab	\$3,210	919	\$549	206	\$1,571	\$5,330	\$1,718	\$184	\$7,232
Total	\$6,420	2,835	\$1,666	611	\$4,848	\$12,934	\$3,436	\$567	\$16,937

RATES:

Wave 1 surveys with comments = \$1.91; Wave 1 surveys without comments = \$1.71; Wave 2 surveys with or without comments = \$1.30

NOTE:

Press Ganey will reimburse County at rate of \$0.20 per survey returned without comments